

UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re) Case No. _____
)
) NOTICE OF DEBTOR'S
Debtor(s)) AMENDMENT OF MAILING LIST
) OR SCHEDULES D, E, F, E/F, G AND/OR H

I. FILING INSTRUCTIONS FOR DEBTOR(S):

- A. File this form to add or delete creditors from the mailing list and/or [Schedules D, E, F, E/F, G and/or H](#), or change the amount or classification of a debt listed on schedules D, E, F and/or E/F. An amendment [filing fee](#) is required.
- B. If filing in paper, you must also include a creditor mailing list with ONLY the NEW or DELETED creditors listed in the format set forth on [Local Form 104](#). Be sure to label each set of changes (i.e., "Add", "Delete", etc.).
- C. If amending Schedules D, E, F, E/F, G and/or H, label them as "Supplemental" and include ONLY the NEW information, and file them with this notice.
- D. If amending Schedules D, E, F and/or E/F, you must also file [Official Form 106Sum](#) for individual debtors, or [Official Form 206Sum](#) for non-individual debtors.
- E. If the case is closed, you must also file a separate Motion to Reopen with the applicable [filing fee](#).
- F. To file an address change for a previously listed creditor, use [Local Form 101C](#) instead of this form.

II. SERVICE INSTRUCTIONS FOR DEBTOR(S):

- A. **When adding creditors:** Serve each new creditor with a copy of this notice, and a copy of any of the following documents that have already been filed in this case:
 1. **(All chapters)** The Notice of the Meeting of Creditors that includes **all 9 digits** of any Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN).
 2. **(All chapters)** Each applicable amended schedule.
 3. **(All chapters)** When the time for filing a timely proof of claim or complaint under 11 USC §523(c) or §727 has expired, a separate notification that adding the creditor may not result in discharge of the debt. [Note: You must create this notification.]
 4. **(Chapter 7 or 11)** Any order, and any supplemental order, fixing time for filing a proof of claim form.
 5. **(Chapter 9, 11, 12, or 13)** (a) The notice of any pending confirmation hearing, all related documents required to be sent with that notice and, in a Chapter 13 case, the most recent proposed plan; or (b) the most recent confirmation order, the most recent confirmed plan, and, if a confirmed Chapter 11 plan, the approved disclosure statement related to the confirmed plan.
 6. **(Chapter 11, 12 or 13)** Any notice of modification of plan, including attachments, if time for objection has not expired.
 7. **(Chapter 9 or 11 only)** The names and addresses of the Chairperson and any attorney for each official Committee of Creditors or Equity Security Holders.
 8. **(Chapter 9 or 11)** The notice of any pending hearing on a proposed disclosure statement, with attachments.
- B. **When deleting creditors, changing a creditor status (e.g., nondisputed to disputed), or reducing a creditor's claim:** Serve each affected creditor with a copy of this notice, the applicable amended schedule(s), and the following:
 1. **(All chapters)** A notice to each deleted creditor that: (a) the creditor is being deleted and will not receive further notices unless the creditor files a written request with the court that includes the debtor's name, full case number, and the creditor's name and mailing address; and (b) if time has been fixed to file a proof of claim, the creditor should contact his/her attorney with any claims questions.
 2. **(Chapter 9 or 11)** A notice to each affected creditor that a proof of claim must be filed by the later of either (a) 30 days from the service date of this notice, or (b) the latest time fixed by the court.

III. CERTIFICATE OF COMPLIANCE:

The undersigned, who is the debtor or debtor's attorney, certifies that: (A) all applicable requirements above have been completed; AND (B) the attachments are true and correct [or were individually verified by the debtor(s)].

Dated: _____

Signature

Type or Print Signer's Name **AND** Phone No.

Debtor's Address & Taxpayer ID#(s) (last 4 digits)

Fill in this information to identify the case:Debtor name The Michael King Smith FoundationUnited States Bankruptcy Court for the: DISTRICT OF OREGONCase number (if known) 16-30233☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>20,822,048.09</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>21,122,231.57</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>41,944,279.66</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>9,415,714.02</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 6a of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 6b of <i>Schedule E/F</i>	+\$ <u>34,391.36</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>9,450,105.38</u>

Fill in this information to identify the case:

Debtor name The Michael King Smith Foundation

United States Bankruptcy Court for the: DISTRICT OF OREGON

Case number (if known) 16-30233

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ *Amended Schedule A/B, D, H, SOFA*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 25, 2016

X /s/ Lisa Anderson

Signature of individual signing on behalf of debtor

Lisa Anderson

Printed name

Trustee

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **The Michael King Smith Foundation**United States Bankruptcy Court for the: **DISTRICT OF OREGON**Case number (if known) **16-30233**☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	Gemcap Lending I, LLC Creditor's Name 24955 Pacific Coast Highway Suite A202 Malibu, CA 90265 Creditor's mailing address Creditor's email address, if known Date debt was incurred 3/2013 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. Yamhill County, Hoffman Construction	Describe debtor's property that is subject to a lien All personal property of Debtor; 4 lots described in Yamhill County Recording 201503717 Describe the lien Purchase Money Security; Trust Deed; UCC Filing Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,022,348.74 \$0.00

2.2	Hoffman Construction of Oregon Creditor's Name c/o Steven Zwierzynski Seifer Yeats Zwierzynski & Gragg 121 SW Morrison St., Suite 1025 Portland, OR 97204 Creditor's mailing address Creditor's email address, if known Date debt was incurred	Describe debtor's property that is subject to a lien All of Debtor's Real Property Located in Yamhill County Describe the lien Judgment Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No	\$2,164,046.40 \$0.00
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Debtor 1 **Lisa Anderson**

Case number (if know)

16-30233

First Name

Middle Name

Last Name

3/2013

Last 4 digits of account number

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Do multiple creditors have an interest in the same property?

☒ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

Yamhill County, Hoffman Construction

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

2.3

Yamhill County Tax Assessor

Creditor's Name

**535 NE 5th St. #42
McMinnville, OR 97128**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

Yamhill County, Hoffman Construction

Describe debtor's property that is subject to a lien

All Real Property Located in Yamhill County

\$1,229,318.88

\$0.00

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$9,415,714.02

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

-NONE-

On which line in Part 1
did you enter the
related creditor?

Line

Last 4 digits of
account number
for this entity

Fill in this information to identify the case:Debtor name The Michael King Smith FoundationUnited States Bankruptcy Court for the: DISTRICT OF OREGONCase number (if known) 16-30233☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

Name		Mailing Address	Name	Check all schedules that apply:
2.1	Delford M. Smith	22111 Riverwood Rd. Dundee, OR 97115	Gemcap Lending I, LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2	Venture Holdings, Inc.	1271 NE HWY 99W PMB 502 McMinnville, OR 97128	Gemcap Lending I, LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

**United States Bankruptcy Court
District of Oregon**

In re **The Michael King Smith Foundation**

Debtor(s)

Case No. **16-30233**

Chapter **11**

VERIFICATION OF CREDITOR MATRIX - AMENDED

I, the Trustee of the Business Trust named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **March 25, 2016**

/s/ Lisa Anderson

Lisa Anderson/Trustee

Signer/Title

Century Aviation
3908 Airport Way
East Wenatchee, WA 98802

Charles Paternoster
Parsons Farnell & Grein, LLP
1030 SW Morrison Street
Portland, OR 97205

Colin Powers
PO Box 1812
La Pine, OR 97739

Delford M. Smith
22111 Riverwood Rd.
Dundee, OR 97115

Evergreen Aviation and Space Museum
500 Northeast Captain Michael King Smith
McMinnville, OR 97128

Gemcap Lending I, LLC
24955 Pacific Coast Highway
Suite A202
Malibu, CA 90265

Group Mackenzie, Inc.
1515 SE Water Avenue
Suite 100
Portland, OR 97214

Hoffman Construction of Oregon
c/o Steven Zwierzynski
Seifer Yeats Zwierzynski & Gragg
121 SW Morrison St., Suite 1025
Portland, OR 97204

K&L Gates
1 SW Columbia Street
Suite 1900
Portland, OR 97258

Legend Flyers
c/o Bob Hammer, Registered Agent
10728 36th Ave W.
Bldg 221
Everett, WA 98204

Miller Nash
111 SW Fifth Avenue
Suite 3400
Portland, OR 97204

North Pacific Evergreen, LLC
17116 Edwin Road
Woodburn, OR 97071

Paul Kuehne
Creekside Valley Farm
4570 Lafayette Hwy
Dayton, OR 97114

Venture Holdings, Inc.
1271 NE HWY 99W PMB 502
McMinnville, OR 97128

Yamhill County Tax Assessor
535 NE 5th St. #42
McMinnville, OR 97128